POSITION	INITIALS	ID NO.	DATE
	7H/7		08/29/0
FEE DETERMINATION			8-3.1.01
O.I.P.E. CLASSIFIER	*1a*	*1019*	09-28-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date						
Final	Original							
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If more than 150 claims or 10 actions
staple additional sheet here

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